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PTO/SB/05(11-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. LE-2002-0314.03

First Named Inventor Roger S. Cannon

Title Stationary Coil Oscillator Scanning System

Express Mail Label No. EV 449 754 166 US

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

ADDRESS TO:
Commissioner for Patents
Mail Stop PATENT APPLICATION
P.O. Box 1450
Alexandria, VA 22313-1450

1	<input checked="" type="checkbox"/>	Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)
2		Applicant claims small entity status
3	<input checked="" type="checkbox"/>	Specification [Total Pages 64]
4	<input checked="" type="checkbox"/>	Drawing(s) (35 U.S.C 113) [Total Sheets 12]
5		Oath or Declaration [Total Pages]
a.	<input type="checkbox"/>	Newly executed (original or copy)
b.	<input checked="" type="checkbox"/>	Copy from a prior application (37 CFR 1.63(d))
i.	<input type="checkbox"/>	DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>
6	<input type="checkbox"/>	Application Data Sheet. See 37 C.F.R. 1.76
7	<input type="checkbox"/>	CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8		Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>
a.	<input type="checkbox"/>	Computer Readable Form (CRF)
b.		Specification Sequence Listing on:
i.	<input type="checkbox"/>	CD-ROM or CD-R (2 copies); or
ii.	<input type="checkbox"/>	paper
c.	<input type="checkbox"/>	Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9	<input type="checkbox"/>	Assignment Papers (cover sheet & document(s))
10	<input type="checkbox"/>	37 CFR 3.73(b) Statement <i>(when there is an assignee)</i>
11	<input type="checkbox"/>	English Translation Document <i>(if applicable)</i>
12	<input type="checkbox"/>	Information Disclosure Statement (IDS)/PTO-1449
13	<input checked="" type="checkbox"/>	Preliminary Amendment
14	<input checked="" type="checkbox"/>	Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>
15	<input type="checkbox"/>	Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>
16	<input type="checkbox"/>	Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent
17	<input type="checkbox"/>	Other:

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

 Continuation Divisional Continuation-in-part (CIP) of prior application No.: 10/327,761

Prior application information: Examiner Cherry, Euncha P

Group / Art Unit: 2872

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

Customer No. 000408	or Bar Code Label	(Insert Customer No. or Attach bar code label here)		or Correspondence address below		
Name	LUEDEKA, NEELY & GRAHAM, P.C.					
Address	P.O. Box 1871					
City	Knoxville	State	Tennessee	Zip Code	37901	
Country	U.S.	Telephone	865-546-4305	Fax	865-523-4478	

Name (Print/Type)	Andrew S. Neely	Registration No. (Attorney) 28,979
Signature	ASN	
Date	3/17/04	

FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

Complete If Known

Application Number	NEW
Filing Date	2004.03.17
First Named Inventor	Roger S. Cannon

TOTAL AMOUNT OF PAYMENT	(\$)	770
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Attorney Docket No.	LE-2002-0314.03
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METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account No. 12-2355

Deposit Account Name:
LUEDDEKA, NEELY & GRAHAM

Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17.

2. Payment Enclosed: Check No. 50077

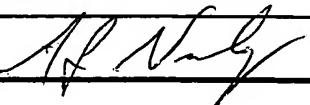
FEE CALCULATION (continued)

3. ADDITIONAL FEES

<u>Large Entity</u>	<u>Small Entity</u>	Fee Description			<u>Fee Paid</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Statement	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
Other fee (specify)					
SUBTOTAL (1)	(\$)		770	SUBTOTAL (3)	(\$)
2. EXTRA CLAIM FEES	Extra Claims	Fee from Claims below	Fee Paid		
Total Claims	10	- 20** = 0	X 0 = 0		
Independent Claims	1	- 3** = 0	X 0 = 0		
Multiple Dependent Claims <i>**or number previously paid, if greater.</i>	X	=			
<u>Large Entity</u>	<u>Small Entity</u>				
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>	Fee Description	
1202	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claim	
SUBTOTAL (2)	(\$)		0	SUBTOTAL (3)	(\$)

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Typed or Printed Name	Andrew S. Neely	Registration No.	28,979
Signature		Date	3/17/04